



Janani Suraksha Yojana (JSY)

State Institute of Health & Family Welfare,
Jaipur



Janani Suraksha Yojana

- JSY scheme-2005. A safe motherhood intervention
- Replaces "National Maternity Benefit Scheme".
- 100 % centrally sponsored, largest cash-subsidy scheme
- Integrates cash assistance with delivery & post-delivery care.
- Pay- for performance

Source:- Paying for Performance: The Janani Suraksha Program in India

Pay – for– Performance

- Pay – for –performance (P4P) is a strategy that links payment to results.
- It is an important complement to strengthen health systems and achieve Millennium Development Goals(MDG) and other targets that represent better health status for people.

Source:- Paying for Performance:The Janani Suraksha Program in India



Goals

- To reduce maternal and infant mortality through increasing institutional delivery,
- Access to quality antenatal and postpartum health care

The program provides a continuum of care package that includes ANC, institutional delivery, postpartum care, and family planning coordinated by the ASHA



Janani Suraksha Yojna

Vision

- To promote Institutional Deliveries
- To reduce overall Maternal Mortality Ratio and Infant Mortality Rate.



Beneficiaries

- Pregnant women of all section of the society.
- No age bar.
- Irrespective of birth order.
- In rural & urban areas.

JSY: Strategy

- Early registration
- Identification of complicated cases
- 3 ANC & PNC visits
- Organizing referral services and transport
- Convergence with ICDS - involving AWW
- Transparent & timely disbursement of cash
- 24 X 7 delivery services at PHC
- Making FRUs functional
- Building partnership



JSY: Implementation

States/UTs classified as:

- Low performance States (LPS)
 - States covered- 10
 - 8 EAG states
 - Assam
 - J& K
- High Performance States (HPS)-18
- Cash assistance linked to ID
- Incentive to ASHA

Source:- Paying for Performance: The Janani Suraksha Program in India



JSY: Key features

- Early registration and identification of complicated cases;
- Referral and referral transport when necessary
- Micro-birth plans
- Institutional birth
- ANC visits and postpartum visits

JSY: Key features

- Assistance for Caesarean Section – Rs.1500/-
- Compensation payment for Tubectomy
/Laparoscopy
- Disbursement of cash assistance
- Partnership with private sector
- Provision to meet administrative expenses

Cash Assistance



- JSY program go to two types of recipient:
- Women receive demand-side payment for accessing a continuum of maternal and newborn health services at Gov.& accredited private institutions
- Individual community health workers receive supply side payment

Source:- Paying for Performance: The Janani Suraksha Program in India

Cash Assistance

- Cash assistance also given for deliveries at accredited pvt. Institutions, but the beneficiary has to pay the total cost
- No incentive for ASHA for accompanying to pvt. Institution

JSY: Eligibility for cash assistance for Demand Side



Low Performance States	All pregnant women delivering in Government health centers like Sub-centre, PHC/CHC/ FRU / general wards of District and state Hospitals or accredited private institutions
High Performance States	Schedule caste, schedule tribe and BPL pregnant women, aged 19 years and above
LPS & HPS	All SC and ST women delivering in a government health centre like Sub-centre, PHC/CHC/ FRU / general ward of District and state Hospitals or accredited private institutions

Role of ASHA

Duties of ASHA - Sahyogini:

- Registration of eligible beneficiary.
- Antenatal checkup (3 times)
- Arrange referral transport, Escort her to health facility & facilitate cash assistance from PHC/CHC/DH.
- Post natal checkup (2 times).

JSY: Eligibility for Cash Assistance for Supply Side



- Payment is made only if the ASHA escorts the pregnant woman to the delivery facility and stay with her until the delivery is completed
- To receive the JSY payment the women must present documents-JSY card, BPL certificates

Scale of assistance for ID

Category	Rural Area		Total	Urban Area		Total
	Mother's Package	ASHA's Package	Rs.	Mother's Package	ASHA's Package	Rs.
LPS	1400	600	2000	1000	200	1200
HPS	700		700	600		600

- Rs. 300 is paid to beneficiaries for transportation who has come directly to institution for delivery without ASHA in Rural area.
- Beneficiary brought by 108 Ambulance the beneficiary & RMRS are paid 150/- each (Transportation)



- ASHA-Sahayogini is paid the first installment of Rs 100/- (for ANC reg, TT injection, 3 ANCs, IFA tab and motivation) at the institution at the time of discharge of the beneficiary.
- ASHA-Sahayogini is paid the second installment of Rs 100/- after 42nd day on completion of 5 PNC (1, 3, 7, 28, 42nd day) for mother & the new born & immunisation of new born with BCG, DPT-I and OPV-I
- In Rural area Rs. 400/- for transport is paid with first installment.



- **Benefits to trained Dai:**

- 10-06-09 onward if trained Dai escorts the beneficiary:-

Trained Dai is being paid Rs. 200/- for escorting the beneficiary for institutional delivery. Except 5 districts Alwar, Bharatpur, Bhilwara, Dausa & Jhunjhunu.

- **Benefits to JMC:-**

11-08-09 onward if JMC escorts the beneficiary:-
JMC is being paid Rs. 200/- for escorting the beneficiary for institutional delivery.



- All BPL pregnant women a cash assistance of Rs. 500/- 8-12 weeks prior to delivery.
- The remaining amount is being paid on institutional delivery.
- An amount of Rs.500 for home delivery is paid for a BPL Beneficiary, Irrespective of age & number of Children.

JSY: Special approach for LPS



- Age restriction removed
- Restricting benefits of JSY up to 2 births removed. the benefits of the scheme are extended to all pregnant women in LPS states irrespective of birth orders.
- No need for any marriage or BPL certification provided woman delivers in Government or accredited private health institution.
- GOI set the guidelines depending the specific context of the state. For Exa. In Rajasthan 5 liters of Desi Ghee is also provided to BPL women at the time of her first delivery

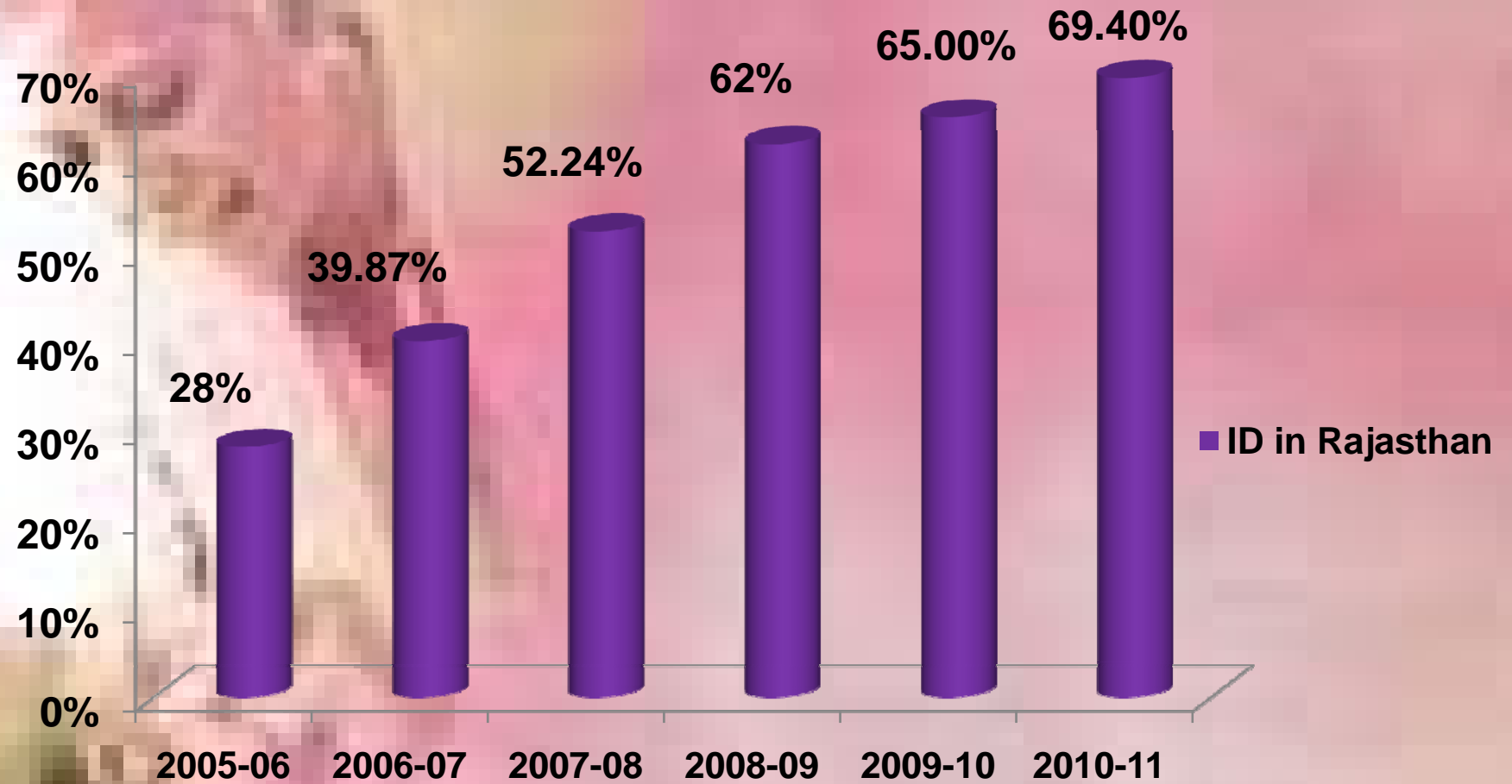


Number of JSY beneficiaries (in Lakhs)

Year	Rajasthan	Financial Progress
05-06	0.05	17.70
06-07	3.88	3056.00
07-08	7.75	13005.00
08-09	9.17	14975.23
09-10	9.78	16248.08
10-11	9.86	18004.04



JSY: Institution Delivery



Source: Pragati Prativedan 2010-11 & DM&HS



Accrediting of Private Facilities under JSY

- Under JSY a provision of facility to avail services of private hospitals through accreditation
- Up-to two private hospitals per block are to be accredited as tehsil or block level.

Source:-Paying for performance: The Janani Suraksh Program in India

Main Difficulties of JSY



- Non availability of Referral Transport at block level.
- ASHA is not assisting pregnant women at most places.
- Delayed Payment of JSY incentive to the beneficiaries & ASHA-Sahayogini.
- Women are discharged after delivery before minimum recommended stay.
- Reporting of physical and financial progress of JSY is not timely and consistent.
- Lack of required specialists at the facilities

Rajasthan Janani-Shishu Suraksha Yojana (RJSSY)



Object-

Assures NIL out of pocket expenses
in all Government Health Institutions
For Pregnant Women & Newborns.

Source:-DM&HS

जननी-शिशु सुरक्षा कार्यक्रम

प्रदेश के सभी राजकीय चिकित्सा संस्थानों पर प्रसूताओं एवं बीमार नवजात शिशुओं को निःशुल्क चिकित्सा सुविधायें

प्रसूताओं व बीमार नवजात शिशु (30 दिन तक) देखभाल हेतु निःशुल्क प्रावधान :-

- निःशुल्क संस्थागत प्रसव
- निःशुल्क सिजैरियन प्रसव
- निःशुल्क दवाइयां व अन्य सम्बन्धित सामग्री
- निःशुल्क जांच (रक्त, पेशाब, अल्ट्रा सोनोग्राफी इत्यादि)
- निःशुल्क भोजन (सामान्य प्रसव में तीन एवं सिजैरियन में सात दिवस)
- निःशुल्क रक्त सुविधा
- निःशुल्क परिवहन पर से स्वास्थ्य संस्थान तक तथा पैफर किये जाने पर उच्च संदर्भ संस्थान तक व वापस घर तक
- अब सभी प्रकार के यूजर चार्ज पर छूट

सिंह जी निम्नलिखित के लिए कृपया आवेदन करें :- सम्बन्धित प्रभारी चिकित्सा अधिकारी, राजकीय चिकित्सा संस्थान

Entitlements for Pregnant Women



- Free delivery
- Free caesarian section
- Free drugs & consumables
- Free diagnostics (Blood, Urine tests & Ultra sonography etc.)
- Free diet during stay (up to 3days for normal delivery & 7 days)
- Free provision of blood
- Free transport from home to health institutions, between health institutions in case of referrals and drop back home
- Exemption from all kinds of user charges



Entitlements for Sick Newborn till 30 days after birth

- Free and zero expense treatment
- Free drugs & consumables
- Free diagnostics
- Free provision of blood
- Free transport from home to health institutions, between health institutions in case of referrals and drop back home
- Exemption from all kinds of user charges

Status of RJSSY as on 31st Oct, 2011



S.No	Services	No. of Beneficiaries
1	Total Deliveries	122617
2	No. of pregnant women provided free medicine	216259
3	No. of pregnant women provided free lab tests	110023
4	No. of pregnant women availed free hot food	182352
5	No. of pregnant women provided free referral transport	60782
6	No. Sick Neonates (30 days) received free medicine	36378
7	No. Sick Neonates (30 days) received free lab tests	12326
8	No. Sick Neonates (30 days) received free referral transport	2447

Source:-DM&HS



Research on JSY

- A study by Center for Operational Research & Training (2007), conducted Rajasthan “compared the number of deliveries in public sector facilities before and after the JSY program”.

Findings:- Number of institutional deliveries in the public sector increased by 36%.

- Study of motivation for institutional delivery, more than half of mothers (173 mothers interviewed) stated that the **JSY incentive payment was a major factor in their decision to deliver**

(Study conducted in Rajasthan by Center for Operational Research & Training facility.)

Source:-Paying for performance: The Janani Suraksh Program in India



Research Cont.

Population Research Center at Mohan Lal Sukhadiya Uni. Conducted a study (2007-08) in two districts Banswara (high record of institutional deliveries)& Barmer (low performance) in Rajasthan. 200 beneficiaries were interviewed.

Findings:-JSY program contributed to increased access to antenatal and postpartum care as well as to increased institutional deliveries.

Source:-Paying for performance: The Janani Suraksh Program in India

Case Study

Radha, a newly married young woman in a small village in rural Rajasthan, she was pregnant and her due date was just one week away.

Against the wishes of her in-laws, Radha had left her husband's village and returned to her parents' home.



She was planning to deliver her baby *at home*, just as her mother, Prema, had given birth to her at home 18 years earlier.

According to Prema, Radha's in-laws had recently learned about a government program that is providing a cash payment to women who opt for institutional delivery over the traditional practice of home delivery.



Prema said that the decision of where Radha would deliver caused a conflict between the two families.

She said that Radha's in-laws wanted Radha to deliver in an institution but Prema did not agree with that.

ASHA got information that Radha wants to deliver at home, she contacted Radha and suggested for institutional delivery.

She gave some examples of her neighbors who delivered in hospitals.

ASHA ensured that she delivers in an institution. Now Radha is ready for the institutional delivery, her mother informed her in-laws. And after two days Radha delivered a girl in institution and received good care & incentive from JSY also.





Thank You

For more details log on to
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